PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless corrected maintenance fee notification	below or directed other	wise in Block 1, by (a	a) specifying a new corn	espondence address; a	ind/or (b) indicating a sep	arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
7	7590 03/25/20	009	Certificate of Mailing or Transmission				
5anc 1000				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
San Francisco, CA 94111-4067				Lancing D. Malilan			
•			-		Jessica T. 1410	(Depositor's name)	
			-		June 2	5, 2009 (Date)	
			L		V Valle 2	0, 2000 (Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	OR A	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/717,115 11/19/2003			Constantine Sandu	Constantine Sandu 703451-2001 7326			
TITLE OF INVENTION: MAGNETIC ALIGNMENT SYSTEM FOR SCRAPED-SURFACE HEAT EXCHANGER AND METHOD							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/25/2009	
EXAMIN	VER	ART UNIT	CLASS-SUBCLASS				
BECKER, DREW E		1794	426-231000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ConAgra Foods RDM, Inc. Omaha, Nebraska							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) ar Issue Fee Dublication Fee (No		4l	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requireords of the United State	red) will not be accepte s Patent and Trademark	ed from anyone other that office.	n the applicant; a regis	tered attorney or agent; or	the assignee or other party in	
Authorized Signature_	att	Will-	Date June 25, 2009				
Typed or printed name				Registration No. 57,679			
Box 1450, Alexandria, Vir Alexandria, Virginia 2231	ns for reducing this burd rginia 22313-1450. DO 1 3-1450.	en, should be sent to the NOT SEND FEES OR	COMPLETED FORMS	TO THIS ADDRESS.	e public which is to file (an inutes to complete, includi mments on the amount of to frademark Office, U.S. De SEND TO: Commissioner isplays a valid OMB contro	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.	

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.